

ARIZONA CORPORATION COMMISSION
UTILITIES DIVISION

ANNUAL REPORT MAILING LABEL – MAKE CHANGES AS NECESSARY

A

E-01025A
Ajo Improvement Company
P. O. Drawer 9
Ajo AZ 853210000

ANNUAL REPORT
RECEIVED

APR 01 2005

AZ Corporation Commission
Director Of Utilities

FOR YEAR ENDING

12	31	2004
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FOR COMMISSION USE

ANN 01	04
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PROCESSED BY:

SCANNED

COMPANY INFORMATION

Company Name (Business Name) <u>Ajo Improvement Company</u>			
Mailing Address <u>Post Office Drawer 9</u>			
<u>Ajo</u> (City)		<u>AZ</u> (State)	<u>85321</u> (Zip)
<u>(520) 387-7632</u>		<u>(520) 387-7627</u>	
Telephone No. (Include Area Code)		Fax No. (Include Area Code)	Pager/Cell No. (Include Area Code)
Email Address <u>rmsmith@phelpsdodge.com</u>			
Local Office Mailing Address <u>same as above</u>			
<u>(Street)</u>		<u>(State)</u>	<u>(Zip)</u>
<u>(City)</u>		<u>(State)</u>	<u>(Zip)</u>
Local Office Telephone No. (Include Area Code)		Fax No. (Include Area Code)	Pager/Cell No. (Include Area Code)
Email Address _____			

MANAGEMENT INFORMATION

Management Contact: <u>John Fenn</u>			
<u>One North Central Avenue</u>		<u>Phoenix</u>	<u>AZ</u>
<u>(Street)</u>		<u>(City)</u>	<u>(State)</u>
<u>(602) 366-8278</u>		<u>(602) 366-7315</u>	
Telephone No. (Include Area Code)		Pager/Cell No. (Include Area Code)	
Email Address _____			
On Site Manager: _____			
<u>(Name)</u>			
<u>(Street)</u>		<u>(City)</u>	<u>(State)</u>
<u>(City)</u>		<u>(State)</u>	<u>(Zip)</u>
Telephone No. (Include Area Code)		Pager/Cell No. (Include Area Code)	
Email Address _____			

☐ Please mark this box if the above address(es) have changed or are updated since the last filing.

Statutory Agent: <u>C. T. Corp</u>			
(Name)			
3225 North Central Avenue	Phoenix	AZ	85004
(Street)	(City)	(State)	(Zip)
(602) 277-4792			
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (Include Area Code)	
Attorney: <u>S. David Colton</u>			
(Name)			
One North Central Avenue	Phoenix	AZ	85004
(Street)	(City)	(State)	(Zip)
(602) 366-8143		(602) 366-7321	
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (Include Area Code)	

☐ Please mark this box if the above address(es) have changed or are updated since the last filing.

OWNERSHIP INFORMATION

Check the following box that applies to your company:

- | | |
|---|--|
| <input type="checkbox"/> Sole Proprietor (S) | <input checked="" type="checkbox"/> C Corporation (C) (Other than Association/Co-op) |
| <input type="checkbox"/> Partnership (P) | <input type="checkbox"/> Subchapter S Corporation (Z) |
| <input type="checkbox"/> Bankruptcy (B) | <input type="checkbox"/> Association/Co-op (A) |
| <input type="checkbox"/> Receivership (R) | <input type="checkbox"/> Limited Liability Company |
| <input type="checkbox"/> Other (Describe) _____ | |

COUNTIES SERVED

Check the box below for the county/ies in which you are certificated to provide service:

- | | | |
|-------------------------------------|--|-----------------------------------|
| <input type="checkbox"/> APACHE | <input type="checkbox"/> COCHISE | <input type="checkbox"/> COCONINO |
| <input type="checkbox"/> GILA | <input type="checkbox"/> GRAHAM | <input type="checkbox"/> GREENLEE |
| <input type="checkbox"/> LA PAZ | <input type="checkbox"/> MARICOPA | <input type="checkbox"/> MOHAVE |
| <input type="checkbox"/> NAVAJO | <input checked="" type="checkbox"/> PIMA | <input type="checkbox"/> PINAL |
| <input type="checkbox"/> SANTA CRUZ | <input type="checkbox"/> YAVAPAI | <input type="checkbox"/> YUMA |
| <input type="checkbox"/> STATEWIDE | | |

SERVICES AUTHORIZED TO PROVIDE

Check the following box/es for the services that you are authorized to provide:

☐ **Electric**

- ☐ Investor Owned Electric
- ☐ Rural Electric Cooperative
- ☒ Utility Distribution Company
- ☐ Electric Service Provider
 - ☐ Transmission Service Provider
 - ☐ Meter Service Provider
 - ☐ Meter Reading Service Provider
 - ☐ Billing and Collection
 - ☐ Ancillary Services
 - ☐ Generation Provider
 - ☐ Aggregator/Broker

☐ **Telecommunications**

- ☐ Incumbent Local Exchange Carrier
- ☐ Interexchange Carrier
- ☐ Competitive Local Exchange Carrier
- ☐ Reseller
- ☐ Alternative Operator Service Provider

☐ **Gas**

- ☐ Natural Gas
- ☐ Propane

☐ **Other (Specify)** _____

STATISTICAL INFORMATION

TELECOMMUNICATION UTILITIES ONLY

Total residential access lines	_____ N/A _____
Total business access lines	_____
Total revenue from Arizona operations	\$ _____
Total income from Arizona operations	\$ _____
Value of assets used to serve Arizona customers	\$ _____
Accumulated depreciation associated with those assets	\$ _____

STATISTICAL INFORMATION (CONT'D)

ELECTRIC UTILITY PROVIDERS ONLY

Total number of customers	1012	
Residential	827	
Commercial	130	
Industrial	54	
Public street and highway lighting		
Irrigation		
Resale	1	
Total kilowatt-hours sold	12,945,615	kWh
Residential	4,299,549	
Commercial	7,123,251	
Industrial	1,498,760	
Public street and highway lighting		
Irrigation		
Resale	24,055	
Maximum Peak Load	2.395	MW

GAS UTILITIES ONLY

Total number of customers	N/A	
Residential		
Commercial		
Industrial		
Irrigation		
Resale		
Total therms sold		therms
Residential		
Commercial		
Industrial		
Irrigation		
Resale		

VERIFICATION
AND
SWORN STATEMENT
Intrastate Revenues Only

RECEIVED

APR 01 2005

VERIFICATION

STATE OF AZ

I, THE UNDERSIGNED
OF THE

COUNTY OF (COUNTY NAME)	AZ Corporation Commission Director Of Utilities
NAME (OWNER OR OFFICIAL) TITLE	
COMPANY NAME	

Pima

John Fenn

Ajo Improvement Company

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH	DAY	YEAR
12	31	2004

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT


IN ACCORDANCE WITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS DURING CALENDAR YEAR 2004 WAS:

Arizona Intrastate Gross Operating Revenues Only (\$)

\$ 1,417,720 + 77,112 = 1,494,832

(THE AMOUNT IN BOX ABOVE
INCLUDES \$ 77,112
IN SALES TAXES BILLED, OR COLLECTED)

**REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER REASON, THE REVENUE REPORTED ABOVE DOES NOT AGREE WITH TOTAL OPERATING REVENUES ELSEWHERE REPORTED, ATTACH THOSE STATEMENTS THAT RECONCILE THE DIFFERENCE. (EXPLAIN IN DETAIL)

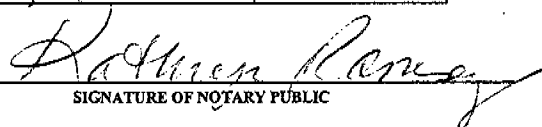

SIGNATURE OF OWNER OR OFFICIAL
602-366-8278
TELEPHONE NUMBER

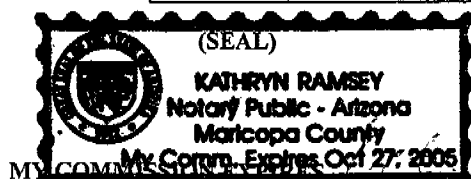
SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS 23rd DAY OF

COUNTY NAME	Maricopa
MONTH	March
	20 <u>05</u>


SIGNATURE OF NOTARY PUBLIC



VERIFICATION
AND
SWORN STATEMENT
RESIDENTIAL REVENUE
INTRASTATE REVENUES ONLY

RECEIVED

APR 01 2005

AZ Corporation Commission
Director Of Utilities

STATE OF ARIZONA

I, THE UNDERSIGNED

OF THE

COUNTY OF (COUNTY NAME) Pima	
NAME (OWNER OR OFFICIAL) John Fern	TITLE President
COMPANY NAME Ajo Improvement Company	

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FOR THE YEAR ENDING

MONTH	DAY	YEAR
12	31	2004

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SWORN STATEMENT

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ARIZONA INTRASTATE GROSS OPERATING REVENUES

\$ 563,803

(THE AMOUNT IN BOX AT LEFT

INCLUDES \$ 29,899

IN SALES TAXES BILLED, OR COLLECTED

*RESIDENTIAL REVENUE REPORTED ON THIS PAGE
MUST INCLUDE SALES TAXES BILLED.

X

SIGNATURE OF OWNER OR OFFICIAL

802-366-8278

TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

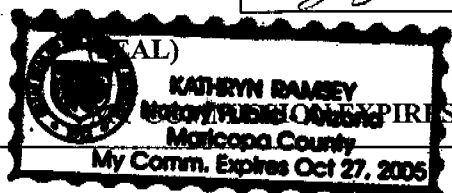
A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

23rd

DAY OF

NOTARY PUBLIC NAME	
COUNTY NAME Maricopa	
MONTH March	2005



Oct. 27, 05

X

SIGNATURE OF NOTARY PUBLIC

FINANCIAL INFORMATION

Attach to this annual report a copy of the companies' year-end (Calendar Year 2004) financial statements. If you do not compile these reports, the Utilities Division will supply you with blank financial statements for completion and filing. **ALL INFORMATION MUST BE ARIZONA-SPECIFIC AND REFLECT OPERATING RESULTS IN ARIZONA.**

SEE ATTACHED FINANCIAL STATEMENTS FOR 2004